Fill in this information to identify your	case:
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
1.	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
١.	Write the name that is on your	Susan	
	government-issued picture identification (for example,	First Name	First Name
	your driver's license or	M. Middle Name	Middle Name
	passport).	Moore	Middle Name
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>6</u> <u>9</u> <u>6</u> <u>4</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Business name	Business name

Deb	otor 1 Case 16-09255 First Name	Doc 1 Filed 03/17/16 Entered 0 Middle Name Document Page 2 of	03/17/16 14:59:06 Desc Main 62e number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
			EIN		
5.	Where you live	EIN	EIN — — — — — — — — — — — — — — — — If Debtor 2 lives at a different address:		
		49 N. Park Ave. Number Street	Number Street		
		Lombard IL 60148 City State ZIP Code	City State ZIP Code		
		DuPage County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		49 N. Park Ave. Number Street	Number Street		
		P.O. Box	P.O. Box		
		Lombard IL 60148 City State ZIP Code	City State ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	art 2: Tell the Court	About Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file	Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of	Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.		
	under	✓ Chapter 7			
		Chapter 11			
		Chapter 12			
		Chapter 13			

Deb	tor 1 Case 16-09255	_M .Doc 1	Filed 03/17/16	Entered 03/1 Page 3 of 52°	L7/16 e numb	14:59:06 er (if known)	Desc Main	
	First Name	Middle Name	DOCANIMAMENT	Paye 3 01 52		,		
8.	How you will pay the fee	court pay w	for more details about h	now you may pay. Ty k, or money order. It	ypically, f your a	if you are payin ttorney is submi	clerk's office in your local g the fee yourself, you may tting your payment on your ed address.	
			d to pay the fee in inst duals to Pay Your Filing	•			d attach the Application for	
		By law than fee in	w, a judge may, but is no 150% of the official pove	ot required to, waive erty line that applies loose this option, you	your fee to your u must f	e, and may do so family size and y ill out the Applic	u are filing for Chapter 7. o only if your income is less you are unable to pay the cation to Have the Chapter 7	
9.	Have you filed for bankruptcy within the	☑ No						
	last 8 years?	Yes.						
		District _		V	When _		Case number	
						M / DD / YYYY		
		District		V	Nhen _ M	M/DD/YYYY (Case number	_
		District _		V	When _		Case number	
10.	Are any bankruptcy	☑ No			IVI	WI7 007 1111		
	cases pending or being filed by a spouse who is	Yes.						
	not filing this case with you, or by a business	Debtor				Relationship	to you	
	partner, or by an	District		V	When	(Case number,	
	affiliate?	_				M / DD / YYYY if		
		Debtor _				Relationship	to you	
		District		V	When	(Case number,	
				_	М	M / DD / YYYY if	f known	
11.	Do you rent your residence?	☐ No. ✓ Yes.	Go to line 12. Has your landlord obtaresidence?	iined an eviction judç	gment a	gainst you and o	do you want to stay in your	
			✓ No. Go to line 12 ✓ Yes. Fill out Initia		ın Evicti	on Judgment Ag	gainst You (Form 101A)	

and file it with this bankruptcy petition.

		_	_				
Deb	tor 1 Case 16-09255 First Name	M.DOO		Filed 03/17/16 Document	Entered 03/17/16 14: Page 4 of 52 number (if	59:06 known)	Desc Main
P				sses You Own as a	Sole Proprietor		
	Are you a sole proprietor of any full- or part-time business?	<u> </u>	No. 0	Go to Part 4. Name and location of bus	·		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busine Single Asset Real I Stockbroker (as de	ox to describe your business: ess (as defined in 11 U.S.C. § 1 Estate (as defined in 11 U.S.C. fined in 11 U.S.C. § 101(53A)) (as defined in 11 U.S.C. § 101(§ 101(51B))	ZIP Code
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	can mos	<i>set ap</i> st recer	propriate deadlines. If you	re court must know whether you undicate that you are a small lent of operations, cash-flow state exist, follow the procedure in 1	business de ement, and f	btor, you must attach your ederal income tax return
	For a definition of small		No.	•	apter 11. r 11, but I am NOT a small busi	ness debtor	according to the definition in
	business debtor, see 11 U.S.C. § 101(51D).		Yes.	the Bankruptcy Code. I am filing under Chapte Bankruptcy Code.	r 11 and I am a small business	debtor acco	rding to the definition in the
Pá	Report If You O	wn oi	r Have	e Any Hazardous Pr	operty or Any Property	That Need	ds Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own		No Yes.	What is the hazard?	needed, why is it needed?		
	any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?	Number Street		

City

State

ZIP Code

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

am not requ	ired to r	receive a	briefing	about
credit counse				

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not	required	to re	eceive	a b	riefing	about
credit co	ounseling	bec	ause o	of:		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Ρ	art 6: Answer These 0	Questions for Reporti	ng Purposes				
16.	What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. ✓ Yes. Go to line 17. 					
16b. Are your debts primarily business debts? Business debts are debts that you money for a business or investment or through the operation of the business or i □ No. Go to line 16c. □ Yes. Go to line 17.						ain	
		16c. State the type of d	lebts you owe that ar	e not consumer or b	usiness debts.		
17.	Are you filing under Chapter 7?	☐ No. I am not filing	g under Chapter 7. G	Go to line 18.			
	Do you estimate that after any exempt property is excluded and	•	•		r any exempt property is excluded and ailable to distribute to unsecured cred		
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☑ No ☐ Yes					
18.	How many creditors do you estimate that you owe?	✓ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-6 5,001-	·	25,001-50,000 50,001-100,000 More than 100,000		
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,00 \$50,00	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?	▼ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$10,00 \$50,00	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Ρ	art 7: Sign Below						
or	you	I have examined this peti and correct.	tion, and I declare un	nder penalty of perju	ry that the information provided is true	€	
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11 or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose proceed under Chapter 7.					•		
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to h fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					ne		
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		<u> </u>	ptcy case can result	in fines up to \$250,0	taining money or property by fraud in 000, or imprisonment for up to 20 year		
		X /s/ Susan M. Moore Susan M. Moore, Deb		X Signa	ature of Debtor 2		
		Executed on 03/17/2		_	uted on		

MM / DD / YYYY

MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s	/ James McCoy		Date	03/17/2016						
Si	gnature of Attorney for Debtor			MM / DD / YYYY						
_	James McCoy									
Pr	inted name									
La	w Office of James McCoy									
Fir	m Name									
10	01 S, Addison Road									
	ımber Street									
_										
_										
_	ddison	IL.		60101						
Ac Cit		IL State	3	60101 ZIP Code						
Cit		State								

F	ill in this inf	ormation to i	dentify your case	and this filing:		
De	ebtor 1	Susan First Name	M. Middle Name	Last Name		
	-1-10	· iiot · taiiio	madic Hame	2ddi Hamo		
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name		
Uı	nited States Bar	nkruptcy Court fo	r the: NORTHERN D	DISTRICT OF ILLINOIS		
Ca	ase number					
	known)				_	if this is an led filing
Of	ficial Form	106A/B				
Sc	hedule A/	B: Propert	y			12/15
the filin she	asset in the ca g together, bo et to this form.	ategory where you th are equally re . On the top of a	ou think it fits best. E esponsible for supply any additional pages,	ist an asset only once. If an ass as as complete and accurate as p ing correct information. If more write your name and case numb ng, Land, or Other Real Es	possible. If two married pe space is needed, attach a er (if known). Answer eve	eople are separate ry question.
						<u> </u>
1.	Do you own o	or have any lega	l or equitable interes	t in any residence, building, land	, or similar property?	
	No. Go t		0			
	Yes. Wh	nere is the proper	ty?			
2.		-		of your entries from Part 1, incluring that number here	_	\$0.00
		iges you have a	tached for Fart 1. W	The triat number nere		
P	art 2: Des	scribe Your V	ehicles			
	•		•	n any vehicles, whether they are also report it on Schedule G: Exec	_	•
3.	Cars, vans, tr	rucks, tractors, s	sport utility vehicles,	motorcycles		
	□ No					
	☐ Yes					
3.1.	_		Who has	an interest in the property?	Do not deduct secured clai	me or exemptions. But the
Mał			Check on		amount of any secured cla	•
Mod	del:	_	Debto	or 1 only	Creditors Who Have Claim	s Secured by Property.
Yea				or 2 only	Current value of the	Current value of the
	roximate milea	ue. ————		or 1 and Debtor 2 only	entire property?	portion you own?
٠.	er information:			ast one of the debtors and another	\$1,000.00	\$1,000.00
	9 Ford Tauru	ıs	☐ Chec	k if this is community property		
				instructions)		
4.	•	•	•	recreational vehicles, other vehit, fishing vessels, snowmobiles, m	*	
	√ No		•		•	
	Yes					
5.		-	•	of your entries from Part 2, inclurite that number here		\$1,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debt	tor 1	Case 16-0925 Susan	55 Doc 1 M .	Filed 03/17/16 Do mone nt	Entered 03/17/16 14:59:06 Page 9 of 52se number (if known)	Desc Main
Debi	101 1	First Name	Middle Name	Last Name	Tage 5	
6.	Exar		_	ns, china, kitchenware		
	☑ ′		sual household	goods and furnishi	ngs	\$2,000.00
7.	Exar	music collecti			equipment; computers, printers, scanners; nes, cameras, media players, games	
		No Yes. Describe				
8.			· · · · · · ·		rk; books, pictures, or other art objects; ons, memorabilia, collectibles	
	-	No Yes. Describe				
9.	-		graphic, exercise,	and other hobby equiprools; musical instrumen	nent; bicycles, pool tables, golf clubs, skis; ts	
		No Yes. Describe				
10.	1	<i>nples:</i> Pistols, rifles, No	shotguns, ammun	ition, and related equip	ment	
	□ `	es. Describe				
11.		mples: Everyday clot	hes, furs, leather o	coats, designer wear, sh	noes, accessories	
	_	es. Describe us	sual wearing ap	parel		\$1,000.00
12.	Jew e Exar	•	elry, costume jewe	Iry, engagement rings,	wedding rings, heirloom jewelry, watches, gen	ns,
		No /es. Describe				
13.		farm animals nples: Dogs, cats, bi	rds, horses			
		No Yes. Describe				
14.	did r	not list	household items	you did not already lis	st, including any health aids you	
		No Yes. Give specific Information				
15.			-		any entries for pages you have	\$3,000.00
Pa	art 4	Describe Yo	our Financial A	Assets		

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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Deb	tor 1 Susan M. Dodwinent Page 10 of case number (if known)	
	First Name Middle Name Last Name	
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	□ No	
	✓ Yes	\$150.00
17.	Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.	
	□ No ☑ Yes Institution name:	
	17.1. Other financial account: Checking account at BMO Harris	\$300.00
18	Bonds, mutual funds, or publicly traded stocks	
10.	Examples: Bond funds, investment accounts with brokerage firms, money market accounts	
	✓ No Yes Institution or issuer name:	
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture	
	✓ No ✓ Yes. Give specific	
	information about them	
20	·	
20.	Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	☑ No	
	Yes. Give specific	
	information about themIssuer name:	
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	□ No	
	Yes. List each	
	account separately. Type of account: Institution name:	
	Additional account: Pension from Elmhurst Memorial Hospital	Unknown
22		
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	
	✓ No ☐ Yes Institution name or individual:	
23	Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)	
_0.	No	
	Yes Issuer name and description:	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	No ☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or	
	powers exercisable for your benefit	
	✓ No Yes. Give specific information about them	

Case 16-09255 Filed 03/17/16 Entered 03/17/16 14:59:06 Desc Main Doc 1 Page 11 of 52 number (if known) Doctoragent Debtor 1 Middle Name 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property; Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **☑** No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **☑** No ☐ Yes. Give specific information \$0.00 Federal: about them, including whether \$0.00 State: you already filed the returns and the tax years..... \$0.00 Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **☑** No ☐ Yes. Give specific information Alimony: \$0.00 \$0.00 Maintenance: Support: \$0.00 Divorce settlement: \$0.00 \$0.00 Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **№** No ☐ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **☑** No Yes. Name the insurance company of each policy and list its value..... Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died **☑** No ☐ Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **☑** No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **☑** No Yes. Describe each claim......

Debtor	Dominion Dominion 10 of 50	esc Main
85. Ar	ny financial assets you did not already list	
✓	No Yes. Give specific information	
 6. Ad	dd the dollar value of all of your entries from Part 4, including any entries for pages you have	
att	tached for Part 4. Write that number here	\$450.00
Part	5: Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37. Do	you own or have any legal or equitable interest in any business-related property?	
✓	No. Go to Part 6. Yes. Go to line 38.	
88. Ac	ccounts receivable or commissions you already earned	Current value of the portion you own? Do not deduct secured claims or exemptions.
✓	· · ·	
	Yes. Describe	
	fice equipment, furnishings, and supplies camples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
∠	No Yes. Describe	
0. Ma	achinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	No Yes. Describe	
1. In	ventory	
	No Yes. Describe	
2. Int	terests in partnerships or joint ventures	
☑	No Yes. Describe Name of entity: % of ownership:	
∟ 3. Cւ	ustomer lists, mailing lists, or other compilations	
	No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe	
4. Ar	ny business-related property you did not already list	
 ✓	No Yes. Give specific information.	
	dd the dollar value of all of your entries from Part 5, including any entries for pages you have tached for Part 5. Write that number here	\$0.00
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a If you own or have an interest in farmland, list it in Part 1.	n Interest In.
6. Do	you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
☑	No. Go to Part 7. Yes. Go to line 47.	

Case 16-09255 Doc 1 Filed 03/17/16 Entered 03/17/16 14:59:06 Desc Main Page 13 ofc52e number (if known) Susan Doctument Doctument Debtor 1 Middle Name Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **☑** No Yes.... 48. Crops--either growing or harvested **☑** No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Yes.... 50. Farm and fishing supplies, chemicals, and feed **☑** No ☐ Yes.... 51. Any farm- and commercial fishing-related property you did not already list **☑** No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have \$0.00 attached for Part 6. Write that number here..... Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **☑** No ☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here.....

\$0.00

Debtor 1 Susan M. Dodviment Page 14 of care number (if known)

Last Name

Middle Name

First Name

P	art 8: List the Totals of Each Part of this Form					
55.	Part 1: Total real estate, line 2			→ .		\$0.00
56.	Part 2: Total vehicles, line 5	\$1,000.00				
57.	Part 3: Total personal and household items, line 15	\$3,000.00				
58.	Part 4: Total financial assets, line 36	\$450.00				
59.	Part 5: Total business-related property, line 45	\$0.00				
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00				
61.	Part 7: Total other property not listed, line 54	<u>\$0.00</u>				
62.	Total personal property. Add lines 56 through 61	\$4,450.00	Copy personal property total	+	<u>. </u>	\$4,450.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62					\$4,450.00

Fill in this inf	ormation to	identify your case	:
Debtor 1	Susan	M.	Moore
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS
Case number			
(if known)			_

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1.	Identify	tha	Property	Vall	Claim as	Evemn
Part I:	iaentiiv	tne	Property	t ou	Ciaim as	s exemb

Р	Identify the Property You Cla	ım as Exempt		
1.	Which set of exemptions are you claiming? ✓ You are claiming state and federal nonbank You are claiming federal exemptions. 11 U	kruptcy exemptions.	even if your spouse is filing 11 U.S.C. § 522(b)(3)	with you.
2.	For any property you list on Schedule A/B that	at you claim as exen	mpt, fill in the information I	below.
	of description of the property and line on needule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
199	f description 9 Ford Taurus from Schedule A/B: 3.1	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
usı	f description all household goods and furnishings from Schedule A/B: 6	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
3.	Are you claiming a homestead exemption of a (Subject to adjustment on 4/01/16 and every 3 y ✓ No ✓ Yes. Did you acquire the property covered ✓ No ✓ Yes	ears after that for cas	ses filed on or after the date	

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Debtor 1

Μ.

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First Name Middle Name

Last Name

Part 2: **Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description usual wearing apparel Line from <i>Schedule A/B</i> :11	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description Cash on hand Line from Schedule A/B:16	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description Checking account at BMO Harris Line from Schedule A/B:17.1	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description Pension from Elmhurst Memorial Hospital Line from Schedule A/B:21	Unknown	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-704

Fill in this inf	ormation to i	identify your case	:	
Debtor 1	Susan First Name	M. Middle Name	Moore Last Name	
Debtor 2 (Spouse, if filing)		Middle Name	Last Name	
		or the: NORTHERN D	ISTRICT OF ILLINOIS	<u>s</u>
Case number (if known)				☐ Check if this i amended filin

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any	creditors	have c	laims	secured	by '	vour	prop	erty
••	DUany	Cicultors	Have c	iaiiiis	300ul cu	IJ,	you	$p_1 \circ p$	Jeity

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Fill in this infe	ormation to i	dentify your case		
Debtor 1	Susan	М.	Moore	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
, , ,		ada NORTHERN R	NOTEDIOT OF ILLING	NC.
United States Bai	ikruptcy Court to	or the: NORTHERN D	ISTRICT OF ILLING	<u> 115 </u>
Case number (if known)				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1.	Do any creditors	have priority	unsecured	claims	against yo	u?
----	------------------	---------------	-----------	--------	------------	----

No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority	Nonpriority
	amount	amount

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Case number (if known) Susan

Debtor 1

Μ. First Name Middle Name Last Name

Do any creditors have nonpriority unsecured claims against you?

|--|

No. You have nothing to report in this part. Submit this form to the court with you other schedules.

√ Yes		
If a creditor has more than one nonpriority unsectype of claim it is. Do not list claims already incl	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, luded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2.	•
		100010101111
4.1	Loot 4 digits of account number 0 0 5 2	\$2,087.00
Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number 0 0 6 2 When was the debt incurred? 04/2007	
P.o. Box 8803 Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Wilmington DE 19899 City State ZIP Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card	
Yes 4.2	Loct 4 digits of account number	\$168.91
Brylan Home Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	
P.O. Box 659728 Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
San Antoniio TX 78265 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Non-Purchase Money	

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Debtor 1

Susan

Μ.

Middle Name First Name Last Name

Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.3		\$910.00
Capital One Bank Usa N Nonpriority Creditor's Name Pob 30281 Number Street	Last 4 digits of account number 7 3 0 8 When was the debt incurred? 02/2005 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Salt Lake City UT 84130 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.4 Capital One Bank Usa N Nonpriority Creditor's Name Pob 30281 Number Street	Last 4 digits of account number 5 3 6 7 When was the debt incurred? 08/2004 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$752.00
Salt Lake City City State Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
✓ No Yes 4.5 Capital One Bank Usa N	Last 4 digits of account number 8 7 5 2	\$553.00
Nonpriority Creditor's Name Pob 30281 Number Street	When was the debt incurred? 02/2006 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Salt Lake City UT 84130 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	

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Case number (if known) Μ. Susan Debtor 1 Middle Name First Name Last Name

After listing any entries on this page, number the	em sequentially from the	
previous page.	an sequentially nom the	Total claim
4.6		\$377.03
Carson Pirie Scott	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 659813		
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
San Antonio TX 78265	_ <u> </u>	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
-	Credit Gard	
Is the claim subject to offset? No		
☑ No ☐ Yes		
4.7		\$632.00
Compaity Pank/paraons	Last 4 digits of account number 1 6 9 8	Ψ002.00
Comenity Bank/carsons Nonpriority Creditor's Name		
3100 Easton Square PI	When was the debt incurred? 07/2012	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Columbus OH 43219	─ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No		
Yes		
4.8		\$3,063.00
Discover Fin Svcs Llc	Last 4 digits of account number7126	
Nonpriority Creditor's Name Pob 15316	When was the debt incurred? 12/2000	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
	─ ☐ Disputed	
Wilmington DE 19850		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	✓ Other. Specify	
-	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
□ '**		

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Debtor 1

Susan

Μ. Middle Name First Name Last Name

After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.9		\$492.24
HSN	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 659707		
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
San Antonio TX 78265	_	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
□	☑ Other. Specify	
Check if this claim is for a community debt	Non-Purchase Money	
Is the claim subject to offset?		
No Vac		
Yes		
4.10		#0.007.00
		\$2,637.93
J.C. Pennys	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 960090	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
O. I. I	Disputed	
Orlando FL 32896 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	✓ Other. Specify	
□	Credit Card	
Is the claim subject to offset?		
No Vas		
Yes		
4.11		\$301.81
	Last 4 digits of account number	φ301.01
Jared Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 740425	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Cincinnati OH 45274	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	•••	
☑ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another		
Check if this claim is for a community debt	✓ Other. Specify Non-Purchase Money	
Is the claim subject to offset?	i di dildo mondy	
No		
Yes		
<u> </u>		

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Debtor 1

Susan

Μ.

Document

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Case number (if known)

First Name Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
Jared-galleria Of Jwlr Nonpriority Creditor's Name 375 Ghent Rd. Number Street	Last 4 digits of account number 0 4 9 1 When was the debt incurred? 05/2012 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$374.00
Akron OH 44333 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	
4.13		\$1,594.45
Juniper Card Services Nonpriority Creditor's Name p.o. Box 6017 Number Street	_ Last 4 digits of account number0062 When was the debt incurred? — As of the date you file, the claim is: Check all that apply. _ □ Contingent □ Unliquidated	
City of Industry City City City Check one. Check one.	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
Yes 4.14		\$0.00
Juniper Card Services Nonpriority Creditor's Name p.o. Box 6017 Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
City of Industry City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	

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Case number (if known)

Debtor 1

Susan

Μ.

Document

First Name Last Name Middle Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
Juniper Card Services Nonpriority Creditor's Name p.o. Box 6017 Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$0.00
City of Industry City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.16 Kohls/capone Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr Number Street	Last 4 digits of account number 7 4 0 6 When was the debt incurred? 05/2007 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$3,014.00
Menomonee Falls City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Charge Account	
No Yes 4.17 Romans Nonpriority Creditor's Name P.O. Box 659728 Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$538.09
San Antonio TX 78265 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Non-Purchase Money	

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Debtor 1

Susan

Μ.

Middle Name First Name Last Name

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.18		\$3,196.00
Syncb/jcp	Last 4 digits of account number 2 2 1 6	
Nonpriority Creditor's Name Po Box 965007	When was the debt incurred? 11/2005	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Charge Account	
Is the claim subject to offset?	-1.m. go , 1000m.1.	
⋈ No		
Yes		
4.19		\$1,846.00
Syncb/sams Club	Last 4 digits of account number 8 0 7 9	
Nonpriority Creditor's Name	When was the debt incurred? 09/2005	
Po Box 965005	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
	Disputed	
Orlando FL 32896 City State ZIP Code	Towns of NONDRIGHTY are seemed alsies	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
No You		
Yes		
4.20		\$4,900.00
Syncb/walmart	Last 4 digits of account number 2 6 7 7	Ψ-1,000.00
Nonpriority Creditor's Name	When was the debt incurred? 07/2006	
Po Box 965024	<u> </u>	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Out-out-	Disputed	
Orlando FL 32896 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
No You		
Yes		

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Debtor 1

Susan

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Debts to pension or profit-sharing plans, and other similar debts

First Name Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecu	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.21		\$657.00
Woman Within Nonpriority Creditor's Name P.O. Box 65972 Number Street	Last 4 digits of account number 5 4 5 3 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
San Antonio City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Non-Purchase Money	
✓ No ☐ Yes 4.22		\$0.00
Woman Within Nonpriority Creditor's Name P.O. Box 659728 Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	<u> </u>
San Antonio TX 78265 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	

Other. Specify

Non-Purchase Money

At least one of the debtors and another

Is the claim subject to offset?

✓ No ☐ Yes

☐ Check if this claim is for a community debt

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Debtor 1

Μ.

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First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$28,094.46
	6j.	Total. Add lines 6f through 6i.	6j.	\$28,094.46

Fill in this in	formation to i	dentify your case	:	
Debtor 1	Susan	М.	Moore	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	j) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINO	IS
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1.	Do you have any executory contracts or unexpired leases?
	No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
	Yes Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B)

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

		Doci	ument Page 29	of_52	
Fill in this infe	ormation to	identify your case	:	_	
Debtor 1	Susan First Name	M. Middle Name	Moore Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court f	or the: NORTHERN D	DISTRICT OF ILLINOIS		
Case number (if known)				Check if this is an amended filing	
Official Form	1064				
Schedule H:		lebtors			
two married peopl needed, copy the	le are filing tog Additional Pag	ether, both are equally e, fill it out, and numbe	responsible for supplying er the entries in the boxes	Be as complete and accurate as possible. If g correct information. If more space is on the left. Attach the Additional Page to this known). Answer every question.	
1. Do you have a ☑ No ☐ Yes	any codebtors	? (If you are filing a jo	int case, do not list either sp	pouse as a codebtor.)	

Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
No. Go to line 3.
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

□ No □ Yes

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

			ment Pag	e 30 of	52 <u>-</u>	
Fill in this infor	mation to identif	y your case:				
Debtor 1	Susan	М.	Moore			
	First Name	Middle Name	Last Name		Che	eck if this is:
Debtor 2	F:N	A# 1 11 A1			п	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name			A supplement showing postpetition
United States Bank Case number	kruptcy Court for the:	NORTHERN	DISTRICT OF IL	LINOIS		chapter 13 income as of the following date
(if known)				_		MM / DD / YYYY
Official Form 1	061					
Schedule I: Yo						12/15
responsible for supp include information a about your spouse. your name and case	olying correct inform about your spouse. If more space is nee	ation. If you ard If you are sepal ded, attach a se Answer every o	e married and not rated and your spo eparate sheet to th	filing joint ouse is no	ly, and your t filing with y	I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
Fill in your emplinformation.						
If you have more	than one		Debtor 1			Debtor 2 or non-filing spouse
job, attach a sep		yment status	☐ Employed	l		Employed
with information a additional employ	vers.		✓ Not employ	ed		☐ Not employed
	Occup	ation	Unemployed			_
Include part-time or self-employed		yer's name				_
Occupation may student or homer applies.	=p.c	yer's address	Number Street			Number Street
			City	State	e Zip Code	City State Zip Code
	How I	ong employed t	here?			
	Details About Mo	onthly Incom	e	ing to repo	ort for any line	, write \$0 in the space. Include your
non-filing spouse unle	ess you are separated		-			
If you or your non-filin you need more space			er, combine the info	ormation fo	or all employe	rs for that person on the lines below. If
				For	Debtor 1	For Debtor 2 or non-filing spouse
	oss wages, salary, and solutions). If not paid monthles			2	\$0.00	
3. Estimate and lis	t monthly overtime	oay.		3. + _	\$0.00	
4. Calculate gross	income. Add line 2	+ line 3.		4.	\$0.00	

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Desc Main

Page 31 of 52 Document Case number (if known) Debtor 1 Susan First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$0.00 List all payroll deductions: \$0.00 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. 5g. \$0.00 5g. Union dues 5h. Other deductions. \$0.00 Specify: Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + \$0.00 5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a 8a. \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 8c. dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. Social Security \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: \$0.00 8g. Pension or retirement income 8g. \$582.49 8h. Other monthly income. 8h. 🛓 Specify: \$0.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$582.49 Calculate monthly income. Add line 7 + line 9. 10. \$582.49 \$582.49 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12 \$582.49 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? I am looking for employment. Yes. Explain:

F	ill in this inforn	nation to ident	ify your case:			Check	if this is:	
	Debtor 1	Susan	М.	Moor			amended filing	
		First Name	Middle Name	Last Na	me		supplement showing apter 13 expenses a	•
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me	1	llowing date:	
	United States Bank	ruptcy Court for the	: NORTHERN D	ISTRICT OI	FILLINOIS	<u></u>	M / DD / YYYY	<u> </u>
ı	Case number						W/ DD/ 1111	
	(if known)							
Of	ficial Form 10)6J						
Sc	chedule J: Yo	 our Expense	es					12/15
cor	rect information. I	If more space is n		her sheet to t	ing together, both and the tope to the top			
Р	art 1: Descr	ibe Your Hous	ehold					
1.	Is this a joint cas	se?						
	_ No	Debtor 2 live in a s	eparate household		s for Separate House	hold of De	ebtor 2.	
2.	Do you have dep	endents?	No					
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this in for each depender		Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the d names.	ependents'						Yes No Yes No Yes No Yes No Yes No Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes					− □ Yes
Р	art 2: Estima	ate Your Ongo	ing Monthly Ex	penses				
Est to r	timate your expens	ses as of your ban	kruptcy filing date	unless you a	re using this form as supplemental Sche			
	•		h government assi n Schedule I: Your	-	know the value of cial Form 106I.)		Your expen	ses
4.			enses for your resi any rent for the gro				4.	\$500.00
	If not included in	line 4:						
	4a. Real estate t	axes					4a	
	4b. Property, hor	meowner's, or rente	r's insurance				4b	
	4c. Home mainte	enance, repair, and	upkeep expenses				4c	

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Susan

First Name

Middle Name

Document

Last Name

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Case number (if known)

Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$50.00 6b. Water, sewer, garbage collection 6b Telephone, cell phone, Internet, satellite, and 6c. \$130.00 cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$200.00 Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 10. 11. Medical and dental expenses 11. \$10.00 12. Transportation. Include gas, maintenance, bus or train 12. fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Health insurance 15b. 15b. \$56.00 Vehicle insurance 15c. 15d. Other insurance. Specify: 15d. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Taxes. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. 17c. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. 19. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20h 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d. 20e. Homeowner's association or condominium dues 20e.

		Case 16-09255		Document Moore	Page 34 of 52	//16 14:59:06	Desc Main
Deb	tor 1	Susan First Name	M. Middle Name	Moore Last Name		Case number (if kno	wn)
21.	Oth	er. Specify:				21.	+
22.	Calc	culate your monthly exp	enses.				
	22a.	Add lines 4 through 21	l.			22a.	\$946.00
	22b.	Copy line 22 (monthly	expenses for	Debtor 2), if any, from C	Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b.	The result is	your monthly expenses.		22c.	\$946.00
23.	Calc	culate your monthly net	income.				
	23a.	Copy line 12 (your con	nbined monthl	y income) from Schedul	e I.	23a.	\$582.49
	23b.	Copy your monthly exp	oenses from lii	ne 22c above.		23b.	\$946.00
	23c.	Subtract your monthly The result is your mon		n your monthly income. e.		23c.	(\$363.51)
24.	Doy	ou expect an increase	or decrease i	n your expenses withi	n the year after you f	ile this form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?						
	$\overline{\mathbf{V}}$	No.					
		Yes. Explain here:					

F	ill in this info	ormation to ider	ntify your case:		<i>,</i>	
D	ebtor 1	Susan	M.	Moore		
_	uphtor 2	First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Bar	nkruptcy Court for the	e: NORTHERN DI	STRICT OF ILLINOIS		
	ase number f known)				Check if	f this is an
		_]	9
	fficial Form					
Sι	ummary of	Your Assets	and Liabilitie	es and Certain Stat	istical Information	12/15
					ooth are equally responsible for nothing the second of the	
					eck the box at the top of this	
ŀ	Part 1: Sur	mmarize Your A	ssets			
						Your assets
1.	Schedule A/B:	: Property (Official Fo	orm 106A/B)			Value of what you own
	1a. Copy line	55, Total real estate	e, from Schedule A/E	3		\$0.00
						\$4.450.00
	1b. Copy line	e 62, Total personal p	property, from Sched	ule A/B		\$4,450.00
	1c. Copy line	e 63, Total of all prop	erty on Schedule A/E	3		\$4,450.00
	.,		•			
P	art 2: Sur	mmarize Your L	iabilities			
						Your liabilities
						Amount you owe
2.			•	Property (Official Form 106D)	page of Part 1 of Schedule D	\$0.00
3	.,	·	·	(Official Form 106E/F)	page of Fait For Concade D	
٠.				,	edule E/F	\$0.00
						+ \$28,094.46
	3b. Copy the	total claims from Pa	rt 2 (nonpriority unse	ecured claims) from line 6j of S	chedule E/F	+
					Your total liabilities	\$28,094.46
					Tour total liabilities	
P	Part 3: Sur	mmarize Your In	ncome and Expe	enses		
4.		our Income (Official F		ah a dula l		\$582.49
	Copy your con	nomea monthly incor	tile from line 12 of So	nedule I		

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$946.00

Debtor 1 Susan M. Dodwingent Page 36 of Case number (if known)
First Name Middle Name Last Name

Part 4: Answer These Questions for Administrative and Statistical Records

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?					
		No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes				
7.	Wha	at kind of debt do you have?				
Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
		Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.				
В.		th the Statement of Your Current Monthly Income: Copy your total current monthly income from cial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.				
	Car	by the following energy estagation of element on Part A. line 6 of Schodule E/E				

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

idual Debtor's Scl	hedules	
		amended filing
IORTHERN DISTRICT (DF ILLINOIS	Check if this is an
/liddle Name Last Na	me	
Moor.		
y your case:		
Document	Page 37 of 52	o Descivialii
ii N	fy your case: M. Moore Middle Name Last Na Middle Name Last Na	fy your case: M. Moore Middle Name Last Name

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
☑ No	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
Yes. Name of person Attach Bankruptcy Petition Preparer's N Declaration, and Signature (Official Form	-						
Under namely, of marity, I dealers that I have read the common and school less filed with this dealerstion and that they are							
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
X /s/ Susan M. Moore X							
Susan M. Moore, Debtor 1 Signature of Debtor 2							
Date 03/17/2016 Date MM / DD / YYYY MM / DD / YYYY							

12/15

			Doci	iment Page	38 of 52	2		
Fi	III in this in	formation to	identify your case	:				
De	ebtor 1	Susan	М.	Moore				
		First Name	Middle Name	Last Name				
	ebtor 2 pouse, if filing) First Name	Middle Name	Last Name				
Ur	nited States Ba	ankruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLIN	ois			
	ase number known)	_				[Check if this is ar amended filing	1
	ficial Form		I Affairs for Ind	ividuals Filin	n for Baı	nkruntev		12/15
you	r name and c	ase number (if k	ce is needed, attach a nown). Answer every oout Your Marital S	question.		. ,	anional pages, will	
1.	What is your	r current marital	status?					
	✓ Not marr	ied						
2.	During the la	ast 3 years, have	you lived anywhere o	ther than where you	ı live now?			
		t all of the places	you lived in the last 3 y	ears. Do not include	where you liv	/e now.		
3.	(Community		ou ever live with a spond territories include Ari	• .			•	∍xas,
	✓ No ☐ Yes. Ma	ke sure you fill o	ut Schedule H: Your Co	debtors (Official Forn	า 106H).			
P	art 2: Ex	ιplain the Sοι	irces of Your Inco	me				
4.	Fill in the total	al amount of inco	om employment or from me you received from a d you have income that	Il jobs and all busines	sses, includin	g part-time activiti	es.	years?
	✓ No ☐ Yes. Fill	in the details.						

Deb	tor 1	Susan	M.	Do owne nt	Page 39 ofc52 number (if known)					
	F	First Name Middle Name Last Name								
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; roy and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.										
	☑ No			each source separate	ely. Do not include income that you listed in line 4.					
Yes. Fill in the details. Part 3: List Certain Payments You Made Before You Filed for Bankruptcy										
6.			1's or Debtor 2's debts p		· ·					
	□ No.	Neither	Debtor 1 nor Debtor 2 h	as primarily consum	ner debts. Consumer debts are defined in 11 U.S.C. § 101(8) as ly, or household purpose."					
		During t	you pay any creditor a total of \$6,225* or more?							
		□ No.	Go to line 7.							
		Yes.	total amount you paid that	at creditor. Do not inc	otal of \$6,225* or more in one or more payments and the clude payments for domestic support obligations, such as de payments to an attorney for this bankruptcy case.					
		* Subjec	et to adjustment on 4/01/1	6 and every 3 years a	after that for cases filed on or after the date of adjustment.					
	✓ Yes.	Debtor	1 or Debtor 2 or both ha	ve primarily consum	ner debts.					
		During t	he 90 days before you file	ed for bankruptcy, did	you pay any creditor a total of \$600 or more?					
		✓ No.	Go to line 7.							
		Yes.	creditor. Do not include	payments for domest	otal of \$600 or more and the total amount you paid that tic support obligations, such as child support and alimony. for this bankruptcy case.					
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general part corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any mark agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation as child support and alimony.					any general partners; partnerships of which you are a general partner; ol, or owner of 20% or more of their voting securities; and any managing					
☑ No ☐ Yes. List all payments to an insider.										

Deb	tor 1	Sus		Doc 1 M .	Filed 03/17/16 Dodwonent	Entered 03/17/16 14:59:06 Page 40 ofc52e number (if known)	Desc Main
8.	\\/i+ŀ		Name ur before you file	Middle Name	Last Name	y payments or transfer any property on ac	count of a debt that
0.		-	insider?	a ioi balikiu	olcy, did you make an	y payments of transfer any property on ac	count of a dept that
	Inclu	ıde paym	nents on debts gu	uaranteed or c	osigned by an insider.		
		No Yes. Lis	t all payments th	at benefited ar	n insider.		
Pa	art 4	: Id	entify Legal A	Actions, Re	possessions, and	Foreclosures	
9.	List	all such	-	g personal inju		in any lawsuit, court action, or administra actions, divorces, collection suits, paternity a	
	ب	No Yes. Fill	in the details.				
10.	seiz	ed, or le	-	·		property repossessed, foreclosed, garnish	ned, attached,
			to line 11. in the informatio	n below.			
11.						r, including a bank or financial institution, ause you owed a debt?	set off any
	<u> </u>	No Yes. Fill	in the details.				
12.		-	-	-	otcy, was any of your ustodian, or another c	property in the possession of an assignee fficial?	for the benefit of
	-	No Yes					
Pa	art 5	: Li:	st Certain Gif	ts and Cor	ntributions		
13.	With	nin 2 yea	rs before you fi	led for bankru	ıptcy, did you give an	y gifts with a total value of more than \$600	per person?
	سا	No Yes. Fill	in the details for	each gift.			
14.		nin 2 yea ny chari	-	led for bankru	uptcy, did you give an	y gifts or contributions with a total value o	f more than \$600
	سنا	No Yes. Fill	in the details for	each gift or co	ontribution.		
Pa	art 6	: Li:	st Certain Lo	sses			
15.		-	r before you file er, or gambling	-	otcy or since you filed	for bankruptcy, did you lose anything bed	ause of theft, fire,
	ب	No Yes. Fill	in the details.				

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Debtor 1

Susan

Doownent

Page 41 of 52 number (if known)

First Name Middle Name

Pa	List Certain Payments or Transfers
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?
	Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.
	✓ No ☐ Yes. Fill in the details.
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.
	✓ No Yes. Fill in the details.
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.
	✓ No Yes. Fill in the details.
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)
	✓ No Yes. Fill in the details.
Pa	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.
	✓ No Yes. Fill in the details.
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?
	✓ No Yes. Fill in the details.
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ✓ №
	Yes. Fill in the details.

Case 16-09255 Filed 03/17/16 Entered 03/17/16 14:59:06 Desc Main Doc 1 **Document** Page 42 of 252 number (if known) Debtor 1 Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **☑** No ☐ Yes. Fill in the details. **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **⋈** No Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? **☑** No ☐ Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **V** No ☐ Yes. Fill in the details. Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

Debtor 1	Case 16-09255 Susan First Name	M. Doo	03/17/16 Mone nt Last Name	Entered 03/17/16 14:59:06 Page 43 of 52 number (if known)					
	nin 2 years before you fi inancial institutions, cre			inancial statement to anyone about your b	ousiness? Include				
	☐ No ☐ Yes. Fill in the details below.								
Part 1	2: Sign Below								
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.									
	usan M. Moore		x						
Susa	n M. Moore, Debtor 1		Signature of	of Debtor 2					
Date	03/17/2016		Date						
Did you	attach additional pages	to Your Statement of	Financial Affa	nirs for Individuals Filing for Bankruptcy (C	official Form 107)?				
✓ No □ Yes									
Did you	pay or agree to pay som	eone who is not an a	ttorney to hel	p you fill out bankruptcy forms?					
☑ No									
Yes.	Name of person			·	cy Petition Preparer's Notice, nature (Official Form 119).				

Case	10-09255		Document	Page 44 of	5/17/10 14.59. 52	.00 Desi	C IVIAIII
Fill in this inf	ormation to	identify your	case:				
Debtor 1	Susan	М.	Moore				
	First Name	Middle Name	e Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	E Last Name				
United Otates De		antha NODTUE	DN DISTRICT OF	II I INOIS			
	nkrupicy Court i	or the: NORTHE	RN DISTRICT OF	ILLINOIS			
Case number (if known)							Check if this is an
(ii kiiowii)							amended filing
Official Form	108						

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: **List Your Creditors Who Hold Secured Claims**

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

Part 2: **List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Susan M. Moore	X
Susan M. Moore, Debtor 1	Signature of Debtor 2
Date 03/17/2016	Date
MM / DD / YYYY	MM / DD / YYYY

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In	re Susan M. Moore	Case No.		
		Chapter	7	
	DISCLOSURE OF COMPENSATION O	OF ATTORNEY FOR	R DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in cois as follows:	ne petition in bankruptcy, or	agreed to be paid to me, for	
	For legal services, I have agreed to accept	<u></u>	\$800.00	
	Prior to the filing of this statement I have received	·····	\$800.00	
	Balance Due		\$0.00	
2.	The source of the compensation paid to me was: ☐ Other (specify)			
3.	The source of compensation to be paid to me is:			
	✓ Debtor ☐ Other (specify)			
4.	☑ I have not agreed to share the above-disclosed compensation associates of my law firm.	n with any other person unle	ess they are members and	
	☐ I have agreed to share the above-disclosed compensation with associates of my law firm. A copy of the agreement, together compensation, is attached.	·		
5.	In return for the above-disclosed fee, I have agreed to render legal	I service for all aspects of the	ne bankruptcy case, including:	
	a. Analysis of the debtor's financial situation, and rendering advice bankruptcy;	e to the debtor in determinin	g whether to file a petition in	
	b. Preparation and filing of any petition, schedules, statements of a	affairs and plan which may	be required;	
	c. Representation of the debtor at the meeting of creditors and cor	nfirmation hearing, and any	adjourned hearings thereof;	

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

 03/17/2016
 /s/ James McCoy

 Date
 James McCoy
 Bar No.

Law Office of James McCoy 101 S, Addison Road Addison, IL 60101

Phone: (630) 274-2424 / Fax: (630) 279-2425

/s/ Susan M. Moore

Susan M. Moore

Document Page 47 of 52 UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Susan M. Moore CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date .	3/17/2016		/s/ Susan M. Moore Susan M. Moore
Date		Signature	

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Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899

Brylan Home P.O. Box 659728 San Antoniio, TX 78265

Capital One Bank Usa N Pob 30281 Salt Lake City, UT 84130

Carson Pirie Scott P.O. Box 659813 San Antonio, TX 78265

Comenity Bank/carsons 3100 Easton Square Pl Columbus, OH 43219

Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850

HSN P.O. Box 659707 San Antonio, TX 78265

J.C. Pennys P.O. Box 960090 Orlando, FL 32896

Jared
P.O. Box 740425
Cincinnati, OH 45274

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Jared-galleria Of Jwlr 375 Ghent Rd. Akron, OH 44333

Juniper Card Services p.o. Box 6017 City of Industry, CA 91716

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Romans P.O. Box 659728 San Antonio, TX 78265

Syncb/jcp Po Box 965007 Orlando, FL 32896

Syncb/sams Club Po Box 965005 Orlando, FL 32896

Syncb/walmart Po Box 965024 Orlando, FL 32896

Woman Within P.O. Box 65972 San Antonio, TX 78265

Woman Within
P.O. Box 659728
San Antonio, TX 78265

			Doci	<u>ıment Page 50 of</u>	52		
Fill	in this inf	ormation to	identify your case:			box only as dire	
Deb	otor 1	Susan	М.	Moore	. -	in Form 122A-1Su	
		First Name	Middle Name	Last Name	1. There is	no presumption of abus	se.
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name	of abuse	ulation to determine if a applies will be made u	nder Chapter 7
Unit	ted States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		est Calculation (Officia	•
	se number nown)					ns Test does not apply ed military service but i	
					Check if t	his is an amended filin	
Offi	cial Form	122A-1					
Cha	apter 7 S	tatement c	of Your Current	Monthly Income			12/15
are e milita 122A	xempted fror ary service, c -1Supp) with	n a presumption omplete and file this form.	n of abuse because yo	s, write your name and case to do not have primarily constition from Presumption of Abo	sumer debts or b	ecause of qualifying	you
1. \	What is your	marital and filir	ng status? Check one o	only			
				nny.			
	⊘ Not mar	ried. Fill out Col	lumn A, lines 2-11.				
		and your spous	se is filing with you. Fi	ill out both Columns A and B, li	ines 2-11.		
		and your spous	se is NOT filing with yo	ou. You and your spouse are	:		
	Livi	ng in the same	household and are no	t legally separated. Fill out bo	oth Columns A and	d B, lines 2-11.	
	dec	lare under penal	Ity of perjury that you an	d. Fill out Column A, lines 2-11 d your spouse are legally sepa s that do not include evading the	rated under nonb	ankruptcy law that appl	ies or that you
l i	bankruptcy c August 31. If in the result.	ase. 11 U.S.C. the amount of your point include a	§ 101(10A). For exampour monthly income varing income amount more	ed from all sources, derived on the plant of	ber 15, the 6-mon ne income for all 6 oth spouses own t	th period would be Marc months and divide the he same rental propert e space. Column B Debtor 2 or	ch 1 through total by 6. Fill
						non-filing spouse	l
	•	rages, salary, ti roll deductions).	ps, bonuses, overtime	, and commissions	\$0.00		
	Alimony and if Column B is	-	ayments. Do not includ	de payments from a spouse	\$0.00		
! } {	expenses of y regular contrib your depende	you or your depoutions from an units, parents, and		ild support. Include	\$0.00		

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Debtor 1

Susan First Name

Middle Name

Last Name

Column A Debtor 1

Column B Debtor 2 or non-filing spouse

Net income from operating a business, profession, or	' tarm
--	--------

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00		_		
Ordinary and necessary operating - expenses	\$0.00	_	- Сору		
Net monthly income from a business profession, or farm	, \$0.00		here ->	\$0.00	

Net income from rental and other real property

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00				
Ordinary and necessary operating - expenses	\$0.00		ору		
Net monthly income from rental or other real property	\$0.00		ere →	\$0.00	

Interest, dividends, and royalties **Unemployment compensation**

\$0.00	
Ф 0.00	

\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you	<u> </u>
For your spouse	
Pension or retirement income. Do not include any amount	received that \$582.49

ቀለ ለሳ

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a

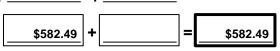
separate page and put the total below.

Total amounts from separate pages, if any. 11. Calculate your total current monthly income.

was a benefit under the Social Security Act.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.



Total current monthly income

Page 52 of 52 Case number (if known) Debtor 1 M. Susan Middle Name First Name Last Name Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: \$582.49 Χ 12 Multiply by 12 (the number of months in a year). \$6,989.88 12b. The result is your annual income for this part of the form. 12b. 13. Calculate the median family income that applies to you. Follow these steps: Illinois Fill in the state in which you live. Fill in the number of people in your household. 2 \$63,820.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. \square Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Susan M. Moore Signature of Debtor 2 Susan M. Moore, Debtor 1 Date 3/17/2016 MM / DD / YYYY MM / DD / YYYY

Entered 03/17/16 14:59:06

If you checked line 14a, do NOT fill out or file Form 122A-2.

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Filed 03/17/16

If you checked line 14b, fill out Form 122A-2 and file it with this form.